

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213541905</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>ABF FREIGHT SYSTEM, INC.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CORPORATION SERVICE COMPANY</b>  <b>BANK OF AMERICA CENTER, 16TH FLOOR</b>  <b>1111 EAST MAIN STREET</b>   <b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>DE</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>9/30/2013</b></p> <p>SCC ID NO: <b>F0590358</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000	
CLASS	AUTHORIZED						
COMMON	1,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 3801 OLD GREENWOOD ROAD</p> <p style="text-align: center;">CITY/ST/ZIP: FT SMITH, AR 72903</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ROY M. SLAGLE  TITLE: PRES/CEO  ADDRESS: 10801 BARRINGTON LANE  CITY/ST/ZIP/CO: FORT SMITH, AR 72908 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: ROY M. SLAGLE TITLE: PRES/CEO ADDRESS: 10801 BARRINGTON LANE CITY/ST/ZIP/CO: FORT SMITH, AR 72908	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MURRAY G. BABB  TITLE: VICE PRESIDENT  ADDRESS: 1338 WOODS ROAD  CITY/ST/ZIP/CO: HACKETT, AR 72937 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: MURRAY G. BABB TITLE: VICE PRESIDENT ADDRESS: 1338 WOODS ROAD CITY/ST/ZIP/CO: HACKETT, AR 72937	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: MURRAY G. BABB TITLE: VICE PRESIDENT ADDRESS: 1338 WOODS ROAD CITY/ST/ZIP/CO: HACKETT, AR 72937	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: WILLIAM DAVID EVANS  TITLE: VICE PRESIDENT  ADDRESS: 3839 SPRING MOUNTAIN ROAD  CITY/ST/ZIP/CO: FORT SMITH, AR 72916 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: WILLIAM DAVID EVANS TITLE: VICE PRESIDENT ADDRESS: 3839 SPRING MOUNTAIN ROAD CITY/ST/ZIP/CO: FORT SMITH, AR 72916	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: GARY W. HUNT  TITLE: VICE PRESIDENT  ADDRESS: 3901 S. 30TH STREET  CITY/ST/ZIP/CO: FORT SMITH, AR 72901 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: GARY W. HUNT TITLE: VICE PRESIDENT ADDRESS: 3901 S. 30TH STREET CITY/ST/ZIP/CO: FORT SMITH, AR 72901	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: GARY W. HUNT TITLE: VICE PRESIDENT ADDRESS: 3901 S. 30TH STREET CITY/ST/ZIP/CO: FORT SMITH, AR 72901	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JAMES W. KEENAN  TITLE: VICE PRESIDENT  ADDRESS: 6002 PARK VALLEY CIRCLE  CITY/ST/ZIP/CO: FORT SMITH, AR 72916 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JAMES W. KEENAN TITLE: VICE PRESIDENT ADDRESS: 6002 PARK VALLEY CIRCLE CITY/ST/ZIP/CO: FORT SMITH, AR 72916	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: JAMES W. KEENAN TITLE: VICE PRESIDENT ADDRESS: 6002 PARK VALLEY CIRCLE CITY/ST/ZIP/CO: FORT SMITH, AR 72916	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MATTHEW LETTER  TITLE: VICE PRESIDENT  ADDRESS: 6607 HIGHLAND PARK DRIVE  CITY/ST/ZIP/CO: FORT SMITH, AR 72916 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: MATTHEW LETTER TITLE: VICE PRESIDENT ADDRESS: 6607 HIGHLAND PARK DRIVE CITY/ST/ZIP/CO: FORT SMITH, AR 72916	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: MATTHEW LETTER TITLE: VICE PRESIDENT ADDRESS: 6607 HIGHLAND PARK DRIVE CITY/ST/ZIP/CO: FORT SMITH, AR 72916	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			

NAME:	GARY S. LIVELY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3710 OLD OAKS LANE		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72903		
NAME:	DANIEL E. LOE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2200 S. 46TH STREET		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72903		
NAME:	KIRK R. MAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6700 RILEY PARK DRIVE		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72916		
NAME:	J. LAVON MORTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASSISTANT VP		
ADDRESS:	10408 INNSBRUCK COURT		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72908		
NAME:	MICHAEL E. NEWCITY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	7300 SOUTH U STREET		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72903		
NAME:	DONALD W. PEARSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	6605 RILEY PARK DRIVE		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72916		
NAME:	DAVID R. COBB	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	11946 CHURCHILL DOWNS		
CITY/ST/ZIP/CO:	SPRINGDALE, AR 72762		
NAME:	BARRY C HUNTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	10305 QUEENSBURY WAY		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72908		
NAME:	MICHAEL R JOHNS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3 LAUREL GLEN		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72903		
NAME:	RICHARD L SPEARMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10716 HUNTERS POINT ROAD		
CITY/ST/ZIP/CO:	FT SMITH, AR 72903		
NAME:	BRYAN SWAIM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	3009 S. 104TH ST.		
CITY/ST/ZIP/CO:	FORT SMITH, AR 72903		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JUDY R MCREYNOLDS DIRECTOR 10601 KINGSLEY COURT FORT SMITH, AR 72908	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIM THORNE VICE PRESIDENT 3801 OLD GREENWOOD ROAD FORT SMITH, AR 72903	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ J. LAVON MORTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	J. LAVON MORTON, ASSISTANT VP PRINTED NAME AND CORPORATE TITLE	9/6/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			